

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS    | ID NO.     | DATE            |
|---------------------------|-------------|------------|-----------------|
| FEE DETERMINATION         |             |            |                 |
| O.I.P.E. CLASSIFIER       | <i>S.B.</i> | <i>895</i> | <i>02-14-01</i> |
| FORMALITY REVIEW          | <i>MA</i>   | <i>830</i> | <i>05-30-01</i> |
| RESPONSE FORMALITY REVIEW |             |            | <i>3/28/02</i>  |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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*70/90*  
*08/30/01*  
*565*  
*3/29/02*